

THE UNITED STATES PATENT OFFICE IS REQUESTED TO IMPRESS ITS  
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Attorney Docket No.: 03DV-9051  
Applicant: George Mazereeuw  
Serial No.: 09/682,005  
Filed: July 6, 2001  
For: VOLTAGE CONTROLLER

Enclosed:  
Express Mail Certificate, Label No. EV339984175US (1 page)  
Preliminary Amendment (2 pages)  
Submission of Marked up Paragraphs (1 page)  
Amendment Transmittal (3 pages) No fee

RBR:jcb  
Mailed: May 27, 2003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: George Mazereeuw

Serial No.: 09/682,005

Filed: July 6, 2001

For: VOLTAGE CONTROLLER

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:  
: Group Art Unit: 2836  
:  
: Examiner: Kim Ngoc Huynh  
:  
:

**CERTIFICATE OF MAILING BY EXPRESS MAIL TO  
THE COMMISSIONER OF PATENTS AND TRADEMARKS**

Mail Stop NON-FEE AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

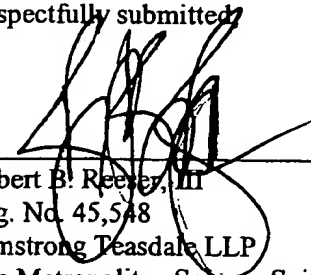
**Express Mail Mailing Label No.: EV339984175US**  
**Date of Mailing: May 27, 2003**

I hereby certify that the documents listed below:

- Amendment Transmittal
- Preliminary Amendment
- Submission of Marked Up Paragraphs
- Postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to: Mail Stop NON-FEE AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Respectfully submitted,



Robert B. Reever, III  
Reg. No. 45,548  
Armstrong Teasdale LLP  
One Metropolitan Square, Suite 2600  
St. Louis, MO 63012  
(314) 621-5070

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: George Mazereeuw

Serial No.: 09/682,005

Filed: July 6, 2001

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**Mail Stop NON-FEE AMENDMENT**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

**TRANSMITTAL**

1. Transmitted herewith is:

**Preliminary Amendment; Submission of Marked up Paragraphs; Express Mail Certificate; Postcard**

**STATUS**

2. Applicant

☒ Claims small entity status.  
☐ is other than a small entity.

**CERTIFICATE OF MAILING/TRANSMISSION**

I hereby certify that this correspondence is, on the date shown below, being:

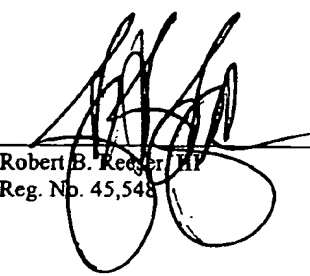
**MAILING**

☒ deposited with the United States Postal Service with sufficient postage as "Express Mail Post Office to Addressee" in an envelope addressed to: Mail Stop NON-FEE AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, Express Mail No. EV339984175US.

**FACSIMILE**

☐ Transmitted by facsimile to the Patent and Trademark Office.

Date: May 27, 2003

  
Robert B. Keefer, Jr.  
Reg. No. 45,548

## EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) \_\_\_\_\_ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
_____ first month	\$ 110.00	\$ 55.00
_____ Second month	\$ 410.00	\$ 205.00
_____ Third month	\$ 930.00	\$ 465.00
_____ Fourth month	\$1,450.00	\$ 725.00
_____ fifth month	\$1,970.00	\$ 985.00

Fee: \$ \_\_\_\_\_

If an additional extension of time is required, please consider this a petition therefor.

*(Check and complete the next item, if applicable)*

\_\_\_\_\_ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$ \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

### FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
TOTAL		MINUS		=	x \$9 = \$		x \$18 = \$
INDEP.		MINUS		=	x \$42 = \$		x \$84 = \$
— FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$140 = \$		+ \$280 = \$
					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

- (a) ☒ No additional fee for claims is required.

OR

- (b) \_\_\_\_\_ Total additional fee for claims required \$

### FEE PAYMENT

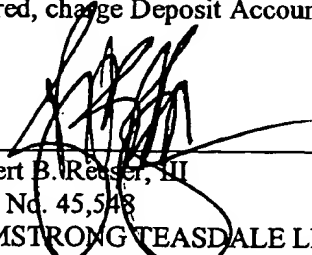
5. \_\_\_\_\_ Attached is a check in the sum of \$ \_\_\_\_\_  
 \_\_\_\_\_ Charge Deposit Account No. 01-2384 the sum of \$ \_\_\_\_\_  
 A duplicate of this transmittal is attached.

### FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7. \_\_\_\_\_ Other:

  
 Robert B. Reiser, III  
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 (314) 621-5070